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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENTEE: Ernesto PALAZZINI ET AL.
PATENT NO.: 7,259,152
ISSUED : AUGUST 21, 2007
TITLE : METHODS AND COMPOSITIONS USING SULODEXIDE FOR THE
TREATMENT OF DIABETIC NEPHROPATHY

**REVOCATION OF POWER OF ATTORNEY AND APPOINTMENT OF NEW
POWER OF ATTORNEY**

MAIL STOP: AMENDMENT

Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Submitted herewith is a Revocation of Power of Attorney with
a New Power of Attorney and Change of Correspondence Address.

Respectfully submitted,

Ernesto PALAZZINI ET AL.

Joseph J. Orlando, Reg. No. 25,218
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I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope
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Amy Klein



PTO Form

PTO/SB/81 (07-08)

Approved for use through 12/31/2008. OMB 0851-0035

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**POWER OF ATTORNEY
OR
REVOCATION OF POWER OF ATTORNEY
WITH A NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/873,234
Filing Date	June 4, 2001
First Named Inventor	Ernesto Palazzini
Title	Methods and Compositions Using Sulodexide for the Tre
Art Unit	
Examiner Name	
Attorney Docket Number	BA-23069

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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OR

☐ I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

Practitioner(s) Name	Registration Number

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number.

OR

☒ The address associated with Customer Number:

OR

178

<input checked="" type="checkbox"/> Firm or Individual Name	Bucknam and Archer				
Address	1077 Northern Boulevard				
City	Roslyn	State	New York	Zip	11576
Country					
Telephone	516-365-9802	Email			

I am the:

☐ Applicant/Inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Mr. Ira S. Nordlicht</i>	Date	10/20/08
Name	Mr. Ira S. Nordlicht	Telephone	
Title and Company	Alfa Wassermann, Inc. CEO + President		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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